

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|----------|---------|
| FEE DETERMINATION | KJ | 16013761 | 6/20 |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | | 7-28-69 | |
| RESPONSE FORMALITY REVIEW | | 16.2445 | 11-3-69 |

INDEX OF CLAIMS

| | | | |
|---------------------|------------|---|--------------|
| ✓ | Rejected | N | Non-elected |
| = | Allowed | I | Interference |
| - (Through numeral) | Canceled | A | Appeal |
| ÷ | Restricted | O | Objected |

9/59/769

BEST AVAILABLE COPY

| Claim | Date |
|-------|----------|
| Final | Original |
| 1 | 1-1-69 |
| 2 | 1-1-69 |
| 3 | 1-1-69 |
| 4 | ✓ |
| 5 | ✓ |
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| 8 | ✓ |
| 9 | ✓ |
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| Claim | Date |
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| Final | Original |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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